Final Abstract Number: 42.041
Session: Parasitology & Parasitic Infections
Date: Thursday, June 14, 2012
Time: 12:45-14:15
Room: Poster & Exhibition Area

Association of *Trichomonas vaginalis* with low birth weight

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Background: Available information suggests that pregnant women infected with *Trichomonas vaginalis* may be at increased risk of preterm delivery and low birth weight (LBW). This study evaluated the association between *T. vaginalis* infection and the risk of LBW.

Methods: In this cohort study, we evaluated 1000 pregnant women (gestational age $\geq$ 28weeks) for trichomoniasis by using direct and culture methods at the time of delivery at two hospitals of Zanjan, Iran. All the infected women (33 cases) and non-infected women (107) who had been selected with purposive quota sampling were compared with each other. Questionnaires were used to collect demographic and obstetric parameters. Consequently, infants' weights were recorded using mothers' files.

Results: The prevalence of *T. vaginalis* infection was 3.3% (33 cases). Mean gestational age of the infected women at the time of delivery was significantly less than the non-infected (36.5 ± 4.5 weeks vs. 39 ± 1.9 weeks; P= 0.009). Higher parity, and living in city were significantly associated with the increased risk of vaginal trichomoniasis (P< 0.05). No significant association was found between the *T. vaginalis* infection and degree of education, type of delivery, family income, and frequency of LBW.

Conclusion: The results of this study suggest that, *T. vaginalis* infection may be associated with lowgestational age and higher parity at the time of delivery. However, no significant association was found between the *T. vaginalis* infection and LBW in the third trimester of pregnancy.

http://dx.doi.org/10.1016/j.ijid.2012.05.712

Type: Poster Presentation

Final Abstract Number: 42.042
Session: Parasitology & Parasitic Infections
Date: Thursday, June 14, 2012
Time: 12:45-14:15
Room: Poster & Exhibition Area

Inacceptable burden of schistosomiasis in the health zone of Kasansa, D.R. Congo

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Background: DRCongo is probably one of the countries in the world most affected by Soil-Transmitted Helminths (STH) and Schistosomiasis. However, accurate data on the disease burden have not been collected since 40 years. Schoolchildren are mainly most affected. We investigate in Kasansa, a rural health zone in the

Methods: Following WHO guidelines, we conducted a cluster randomized crossectional survey in the third class of 8 primary schools. We collected demographic and sanitation data. We collected also stool sample and assessed by direct microscopy and Kato-Katz technique.

Results: A total 335 was included in the study. Fifty-six % were girls and 54% were more than 10 years old. Proportion of IS was 83,3% (95% CI: 78,4-87,0) with an intensity 41,4%. proportion STH was 9,9% (IC95%: 6,9-13,6). Proportion of IS per village was: Kasansa: 91,1% (IC95%: 87,4-93,8); Kashila: 74,5% (IC95%: 69,4-79,0); Lac-lomba: 59,5% (IC95%: 54,0-64,8); Mukong: 94,4% (IC95%: 91,2-96,5); Nsangu: 94,9% (IC95%: 91,8-96,9); Nsenga-Nsenga: 92,0% (IC95%: 88,4-94,6). We were not able to identify any particular risk factor due to the high disease burden.

Conclusion: IS is a major health public problem in Kasansa health zone. Burden of IS in our study area was extremely high and close to 100% in some villages. Schisitosomiasis control measures are urgently needed.

http://dx.doi.org/10.1016/j.ijid.2012.05.713

Type: Poster Presentation

Final Abstract Number: 42.043
Session: Parasitology & Parasitic Infections
Date: Thursday, June 14, 2012
Time: 12:45-14:15
Room: Poster & Exhibition Area

Aggregated studies of urinary schistosomiasis in parts of Ebonyi State, southeast Nigeria

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Background: Human schistosomiasis is an important and widespread infection in the tropics. It gives rise to a complex of acute and chronic diseases with widely differing signs and symptoms. It is the second most prevalent parasitic disease after malaria in the developing world with a huge impact on public health and socio-economic development. There is general agreement that the global prevalence of schistosomiasis will likely increase due to the following three reasons: (i) increasing numbers of irrigation systems for agriculture and cattle breeding. (ii) construction of dams and man-made lakes for hydroelectric power production and (iii) civil strife and war contributing to additional human migration. In Nigeria, schistosomiasis constitutes a public health problem particularly in children

Methods: Aggregated studies were done to establish the prevalence and intensity of *Schistosoma haematobium* infection in some communities of Ebonyi state, southeast Nigeria, using the filtration quantitative technique. Primary school children were used as tracers.

Results: In Abakaliki urban, out of the 800 pupils examined from Assemblies of God Nursery and Primary School and Evangel Nursery and Primary School in Okpaugwu and Ezza road areas respectively, 182 (29.5%) and 160 (40.0%) were infected with *S. haematobium* respectively. A total of 236 (55.7%), 100 (45.5%) males and 128 (34.0%, 60 (33.3%) females respectively, were infected. There was a gradual increase in the disease prevalence with increasing age of the study subjects. About 90% of the infected persons were aged 8 – 14 years. Statistical analysis revealed that the prevalence, intensity and visible haematuria were significantly higher (P > 0.05) in sub-